BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	17.32	200	20.00
O.I.P.E. CLASSIFIER	1	19/	dh
FORMALITY REVIEW	Na	021	00/02/00
RESPONSE FORMALITY REVIEW	/ / /	<u> </u>	091.0Fiw

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— √Through numeral) Canceled	A Appeal
÷ Restricted	O Objected

_	.   Through numeral) Canceled	Α	Appeal	100
. ÷	Restricted	0	Objected	
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		Date	Claim	Date
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If more than 150 claims or 10 actions staple additional sheet here